State of California—Health and Human Services Agency

California Department of Health Services SANDRA SHEWRY

Director

Department of Health Services



CHIP Letter: 04-E-C RHS Letter: 04-E-R

Date Issued: June 16, 2004

TO: CALIFORNIA HEALTHCARE FOR INDIGENTS PROGRAM (CHIP)

AND RURAL HEALTH SERVICES (RHS) PROGRAM CONTACTS

SUBJECT: DOCUMENTS/REPORTS DUE FOR FISCAL YEAR (FY) 2004-05

Enclosed is a listing of the documents/reports required to be completed by all counties participating in the FY 2004-05 CHIP/RHS Program, pursuant to Welfare and Institutions Code, Sections 16916, 16938, and 16980. Please note that the Department of Health Services (DHS) is required to withhold CHIP/RHS Program payments until the required documents/reports are submitted.

We encourage counties to submit the documents/reports to the DHS by the due dates specified in the enclosed listing, so our staff can review and approve the documents/reports without delaying the payment process. Please be aware that in some instances the submissions of multiple documents/reports are necessary before a CHIP/RHS Program payment is authorized. To ensure timely review by our staff, the documents/reports must be complete, reflect the information necessary for DHS approval, specify a contact person for questions regarding its preparation, and be signed by the appropriate county official(s).

Counties are encouraged to go to the CHIP/RHS Program website to obtain all necessary report instructions and forms. The CHIP/RHS County letters can be viewed at:

http://www.dhs.ca.gov/hisp/ochs/chsu/CHIPRHS County Letters.htm

These documents are available in Microsoft Word/Excel or Adobe Acrobat formats.

Internet Address: www.dhs.ca.gov

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If you have any questions or anticipate a delay in the submission of any of these documents/reports, do not hesitate to contact your County Health Services or Medically Indigent Care and Reporting Systems' analyst at (916) 552-8016.

Sincerely,

ORIGINAL SIGNED BY NANCY HAYWARD

Nancy E. Hayward, Chief Medically Indigent Services Section

Enclosure

cc: Mr. Gregory A. Franklin, M.H.A.
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County Auditor-Controller Contacts

Board of Supervisors Contacts

FISCAL YEAR (FY) 2004-05 California Healthcare for Indigents Program (CHIP) Rural Health Services (RHS) Program Due Dates and Payment Month(s)

Document/Report	Due Dates	Payment Month(s)
FY 2002-2003 MICRS Actual Annual AND FY 2004-05 CHIP/RHS Application	06-30-04 09-15-04	July-November
FY 2003-2004 Preliminary Annual Trust Fund	11-15-04	December
FY 2004-05 CHIP/RHS Expenditure Description AND FY 2003-2004 MICRS Estimated Annual	12-15-04 12-31-04	January
FY 2004-05 CHIP/RHS Executed Standard Agreement	01-15-05	February-April
FY 2003-2004 Report of Actual Financial Data AND FY 2003-2004 Final Annual Trust Fund	04-15-05 04-15-05	May-June